



Annual Service Plan Program Expenditure of State Aid

FY 2015-2016

Please indicate library designation:

☐ Affiliate Library ☐ Designate Library ☐ Service Center Library

Library: _____

Service Population: _____

GIA: _____

USE OF STATE GIA FUNDS

Line Item	GIA
A. Personnel	\$
B. Books & Other Library Materials	\$
C. Audit	\$
D. Building Maintenance	\$
E. Continuing Education	\$
F. Insurance	\$
G. Programming	\$
H. Utilities	\$
I. Other (Please list below)	
	\$
	\$
TOTAL:	\$

Library Director:

Signature (Blue Ink) *Date*

West Virginia Library Commission:

Signature *Date*

Description Of Services Provided By Library with State GIA Funds:

Be specific. For example, if GIA is used for wages and benefits indicate how many positions, how many hours, etc. If used for materials, indicate percentage of materials budget paid for with GIA funds.

Affiliate Libraries must return plan to Service Center by May 18, 2015

Designate and Service Center Libraries return form by June 1, 2015 to:

**Denise Seabolt
West Virginia Library Commission
1900 Kanawha Blvd. E.
Culture Center
Charleston, WV 25305**